PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

230461

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
-			(Column 1)		(Column 2)			TYPE		OR	OR SMALL ENTITY		
TOTAL CLAIMS			14			·		RATE	FEE	7	RATE	FEE	
F	OR		NUMBER FILED		NUMBER EXTRA			BASIC FE	E 385.00	OR	BASIC FEE	770.00	
TO	OTAL CHARGE	ABLE CLAIMS	/		*-0			X\$ 9=		OR	X\$18=		
INI	DEPENDENT (CLAIMS	2 m	inus 3 =	· 7			X43=		OR	X86=		
М	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=	 	OR	+290=	<u> </u>	
* [1	the differenc	e in column 1 is	ess than zero, enter "0" in column 2			column 2	i	TOTAL	387	OR	TOTAL	΄ γ ΄	
CLAIMS AS AMENDED - PART II									30	J O.,	OTHER	· · · · ·	
		(Column 1)				(Column 3)	_	SMALL ENTITY (OR SMALL ENTITY		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* ENTATION OF MI	Minus	PENIDENIT	C1 A134	=		X43=		OR	X86=		
L	1		JETH LE DEF	LINDEINT	CLAIIVI			+145=		OR	+290=		
	-						L	TOTAL		OR	TOTAL		
		(Column 1)		(Colum	n 2)	(Column 3)	А	DDIT. FEE	L	10/	ADDIT. FEE		
В		CLAIMS REMAINING		HIGHE	ST		Г		ADDI-	1 [ADDI-	
ENT		AFTER AMENDMENT		PREVIOU PAID F	JSLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X43=			X86=		
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (CLAIM		┢			OR			
								+145=		OR	+290=		
				•		•	· AE	TOTAL DIT. FEE	•	OR A	TOTAL DDIT. FEE		
·		(Column 1)		(Column		(Column 3)	:.	•				• •	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHES NUMBE PREVIOU PAID FO	R	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	sink .		=		X\$ 9=		OR	X\$18=		
	Independent		Minus	***		=	\vdash	X43=			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						\vdash			OR	∧00=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=	·	
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
T	he *Highest Num	ber Previously Paid	For* (Total or I	ndependent) is the h	ighest number	found	in the appr	opriate box			<u> </u>	